

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Brian Medower, et al. RECEIVED
CENTRAL FAX CENTER
Assignee: DPHI Acquisitions, Inc. APR 21 2008
Title: Dual Density Disk With a Writable Portion...
Serial No.: 10/085,682 Filing Date: February 26, 2002
Examiner: Aristotelis Psitos Group Art Unit: 2653
Docket No.: M-12013 US Confirmation No.: 1491

Irvine, California
April 21, 2008

Via Facsimile to (571) 273-8300

Mail Stop : AMD
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that the following documents are being facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below:

- 1) Amendment Transmittal (1 page);
- 2) Response to Office Action (1 pages); and
- 3) Terminal Disclaimer (1 page)

Dated: Apr. 21, 2008

Saundra L. Carr



Number of pages (including this sheet): 12

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AMENDMENT TRANSMITTALVia Facsimile to (571) 273-8300

Mail Stop AMENDMENT
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

04/22/2008 PCOMP 00000044 502257 10085682
 01 FC:2252 230.00 DA

Re:	Applicants:	David L. Blankenbeckler et al.	
Title:	Dual Density Disk With Associated Properties		
Application No.:	10/085,682	Filing Date:	February 26, 2002
Examiner:	Aristotelis M. PSITOS	Group Art Unit:	2653
Docket No.:	M-12013 US	Confirmation No.:	1491

Dear Sir:

Transmitted herewith is an Amendment for the above-identified application:

- Applicant claims SMALL ENTITY
 APPLICANT(s) PETITIONS FOR AN EXTENSION OF TIME AS INDICATED BELOW:

EXTENSION (months)	FEE FOR SMALL ENTITY		FEE FOR LARGE ENTITY	
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1 month	<input type="checkbox"/>	\$60.00	<input type="checkbox"/>	\$120.00
2 months	<input checked="" type="checkbox"/>	\$230.00	<input type="checkbox"/>	\$460.00
3 months	<input type="checkbox"/>	\$525.00	<input type="checkbox"/>	\$1,050.00

If an additional extension of time is required, please consider this a petition therefor.

THE FEES FOR CLAIMS HAS BEEN CALCULATED AS SHOWN BELOW:

Total Claims	-	20 = 0	x	\$50.00	\$0.00
Independent Claims	-	3 = 0	x	\$210.00	\$0.00
Multiple Dependent Claims	\$370	(if applicable)	<input type="checkbox"/>	\$0.00	
Total Claim Calculations				\$0.00	
Reduction by ½ for Claiming Small Entity Status.			<input type="checkbox"/>	\$0.00	
TOTAL CLAIM FEES SUBMITTED HEREWITH				\$0.00	
XX Terminal Disclaimer (\$130 per Large Entity)				\$130.00	
XX Petition for Extension of Time Fees as calculated above				\$230.00	
XX Please charge the fees set forth above to our Deposit Account No. 50-2257 in the amount of				\$360.00	
XX Also, charge any additional fees required and credit any overpayment to our Deposit Account No. 50-2257					

Certification of Facsimile Transmission

I hereby certify that this paper is being facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below.

Jonathan Hallman
 Jonathan Hallman

April 21, 2008

Date of Signature

Respectfully submitted,

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